

**FORM FOR BID**

Having fully examined, read, and in understanding of the specifications for this job and being familiar with all of the conditions surrounding the proposed work, including any addenda for which receipt of is acknowledged below, the undersigned proposes to complete all work as specified in this invitation to bid for the price stated below:

**Company Information:**

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Fax \_\_\_\_\_

This bid includes addenda numbered: \_\_\_\_\_

**Year, Make, Model & Manufacturer's Name:**

\_\_\_\_\_

**TOTAL PRICE:**

\$ \_\_\_\_\_

**TOTAL PRICE WRITTEN IN WORDS:**

\_\_\_\_\_

Each Bidder is requested to include with their bid IN DUPLICATE manufacturer's information which would describe in detail the equipment offered in the bid. This literature may be detached and removed from the bid materials to allow for the Fire Chief to evaluate the apparatus being offered.

**Name of Warranty Service Facility**

**Facility:** \_\_\_\_\_

**City/Town, State:** \_\_\_\_\_

**BID SIGNATURES PAGE**

**Signature for Individual**

\_\_\_\_\_  
Name of Company

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Name and Title of Individual Authorized to Sign

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Signature for Partnerships (must be signed by ALL general partners)**

\_\_\_\_\_  
Name of Partnership

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name and Title of Partner

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name and Title of Partner

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name and Title of Partner

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Telephone Number of Company Offices

\_\_\_\_\_  
Fax Number of Company Offices

**Use additional sheet if necessary**

**BID SIGNATURES PAGE CONTINUED**

**Signatures for Corporation**

\_\_\_\_\_  
Name of Corporation

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name and Title of Duly  
Authorized Company Officer

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Corporate Seal (affix below)

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
Signature of Clerk

Please furnish the following additional information:

Incorporated in what state? \_\_\_\_\_

President: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Secretary: \_\_\_\_\_

\_\_\_\_\_  
If you are a foreign (out of state) corporation, are you registered with the Secretary of the Commonwealth in accordance with the provisions of M.G.L. Chapter 156D § 15.03?

**If you are selected for this work, you are required, under M.G.L. Chapter 30 §391, to obtain from the Secretary of State, Foreign Corporation Section, a certificate stating that your corporation is registered, and to furnish said certificate to the Town of Richmond before award.**

**NON-COLLUSION AFFIDAVIT**

The undersigned certifies under penalties of perjury that this bid or proposal has been made and submitted in good faith and without collusion or fraud with any other person. As used in this certification, the word "person" shall mean any natural person, business, partnership, corporation, union, committee, club, or other organization, entity, or group of individuals.

\_\_\_\_\_  
Signature of individual submitting bid or proposal

\_\_\_\_\_  
Name of Company

\_\_\_\_\_  
Date

**AFFIDAVIT OF COMPLIANCE**

\_\_\_\_\_ Massachusetts Corporation

\_\_\_\_\_ Foreign Corporation

\_\_\_\_\_ Non-Profit Corporation

\_\_\_\_\_ Partnership

\_\_\_\_\_ Sole Proprietorship \*

Name of Corporation \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

As President, or authorized company officer, of the above named corporation, I do hereby certify that the above named corporation has filed with the State Secretary all certificates and annual reports required by M.G.L. Chapter 156B §109 and by Chapter 181 §4

Signed under the penalties of perjury this \_\_\_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_

\_\_\_\_\_  
Signature and Title of Authorized Company Officer

Corporate Seal (affix below):

\*If a sole proprietorship, you must indicate your status as a sole proprietorship; the person signing this bid shall be deemed to be the sole proprietor and legal entity for the purposed of this bid and contract.

**ATTESTATION OF TAXES**

Any person failing to sign the Attestation of Taxes shall not be allowed to obtain, renew, or extend a license, permit, or public contract.

Pursuant to M.G.L. Chapter 62C, §49A, I hereby certify, under the penalties of perjury, that, to the best of my knowledge and belief, I am in compliance with all the laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting child support.

\_\_\_\_\_  
Signature and Title of Authorized Company Officer

\_\_\_\_\_  
Date

Corporate Seal (affix below):

## REFERENCE SHEET

Bidders must submit, on this form or additional sheets if necessary, a list of references of fire apparatus that they have sold to other Cities and Towns as described in these bid documents.

[illegible]

## EXCEPTIONS FORM

Start with 1 <sup>st</sup> page of detailed technical specifications				
Page	Item	Unit	Qty	Price
1	1.00	1.00	1.00	1.00
2	2.00	2.00	2.00	2.00
3	3.00	3.00	3.00	3.00
4	4.00	4.00	4.00	4.00
5	5.00	5.00	5.00	5.00
6	6.00	6.00	6.00	6.00
7	7.00	7.00	7.00	7.00
8	8.00	8.00	8.00	8.00
9	9.00	9.00	9.00	9.00
10	10.00	10.00	10.00	10.00
11	11.00	11.00	11.00	11.00
12	12.00	12.00	12.00	12.00
13	13.00	13.00	13.00	13.00
14	14.00	14.00	14.00	14.00
15	15.00	15.00	15.00	15.00
16	16.00	16.00	16.00	16.00
17	17.00	17.00	17.00	17.00
18	18.00	18.00	18.00	18.00
19	19.00	19.00	19.00	19.00
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25	25.00	25.00	25.00	25.00
26	26.00	26.00	26.00	26.00
27	27.00	27.00	27.00	27.00
28	28.00	28.00	28.00	28.00
29	29.00	29.00	29.00	29.00
30	30.00	30.00	30.00	30.00
31	31.00	31.00	31.00	31.00
32	32.00	32.00	32.00	32.00
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35	35.00	35.00	35.00	35.00
36	36.00	36.00	36.00	36.00
37	37.00	37.00	37.00	37.00
38	38.00	38.00	38.00	38.00
39	39.00	39.00	39.00	39.00
40	40.00	40.00	40.00	40.00
41	41.00	41.00	41.00	41.00
42	42.00	42.00	42.00	42.00
43	43.00	43.00	43.00	43.00
44	44.00	44.00	44.00	44.00
45	45.00	45.00	45.00	45.00
46	46.00	46.00	46.00	46.00
47	47.00	47.00	47.00	47.00
48	48.00	48.00	48.00	48.00
49	49.00	49.00	49.00	49.00
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64	64.00	64.00	64.00	64.00
65	65.00	65.00	65.00	65.00
66	66.00	66.00	66.00	66.00
67	67.00	67.00	67.00	67.00
68	68.00	68.00	68.00	68.00
69	69.00	69.00	69.0	

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**If additional space is required, please photocopy this form**